

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Application of)
Todd A. Wolford, et al.) Group: 3732
Serial No.: 10/659,812)
Filed: September 11, 2003) Examiner:
Title: ORTHOPAEDIC REAMER DRIVER)
FOR MINIMALLY INVASIVE SURGERY)

INFORMATION DISCLOSURE STATEMENT

MS DD
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

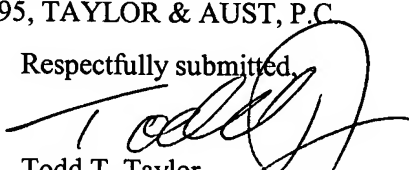
Applicant wishes to bring to the attention of the Examiner the documents identified on the attached form PTO-1449. Applicant respectfully requests that these documents be made of record in the present application.

A copy of each of the documents is enclosed.

This information is being submitted within three months after the filing date of the present application, or before the mailing date of a first Office Action on the merits.

In the event Applicants have overlooked the need for a payment of fee, or additional payment of fee, or have overpaid a fee, Applicants hereby conditionally petition therefor and authorize that any charges or credits be made to Deposit Account No. 20-0095, TAYLOR & AUST, P.C.

Respectfully submitted,


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Encs.: Form PTO-1449
Return Postcard

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: MS DD, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on: January 20, 2004.

Todd T. Taylor, Reg. No. 36,945

NAME OF REGISTERED REPRESENTATIVE


SIGNATURE

January 20, 2004
DATE

ATTORNEY DOCKET NO.:
SMI0068.USSERIAL NO:
10/659,812

INFORMATION DISCLOSURE STATEMENT

APPLICANT:
Todd A. Welford, et al.

JAN 23 2004

FILING DATE:
September 11, 2003GROUP:
3732

U.S. PATENT DOCUMENTS

Examiner Initial *		Document No.	Date	Name	Class	Subclass	Filing Date
	AA	2003/0212402	11/2003	White et al.	606	81	May 8, 2003
	AB						
	AC						
	AD						
	AE						
	AF						
	AG						
	AH						
	AI						
	AJ						
	AK						

FOREIGN PATENT DOCUMENTS

							Translation	
		Document No.	Date	Country	Class	Subclass	Yes	No
	AL							
	AM							
	AN							
	AO							
	AP							

OTHER REFERENCES (INCLUDING AUTHOR, TITLE, DATE, PERTINENT PAGES, ETC.)

EXAMINER:

DATE CONSIDERED:

*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.